

Attorney Docket No.: 15266US01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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MAY 11 2005

In the Application of:

Stephen Wu et al.

Serial No.: 09/692,654

Filed: October 18, 2000

For: ADAPTIVE RADIO TRANSCEIVER
WITH POLYPHASE CALIBRATION

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being sent via facsimile transmission to Marceau Milord, an Examiner with the United States Patent and Trademark Office, at (703) 872-9306 on May 11, 2005.

By: Michael T. Cruz
Michael T. Cruz
Reg. No. 44,636

Examiner: Marceau Milord

Group Art Unit: 2682

Conf. No.: 7167

RESPONSE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This paper is filed in response to the Office Action mailed January 11, 2005. A Petition for a One-Month Extension has been enclosed, thereby extending the period of response to May 11, 2005. In the Office Action, claims 1-61 were rejected and claims 62-68 were objected to. It is respectfully requested that the Examiner consider the remarks herein which place claims 1-68 in condition for allowance.

FROM McANDREWS, HELD, & MALLOY

(WED) 5.11'05 19:26/ST. 19:26/NO. 4861050542 P 1



MCANDREWS, HELD & MALLOY
34TH FLOOR
500 WEST MADISON STREET
CHICAGO, ILLINOIS 60661

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MAY 11 2005

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TO: Marceau Milord
Examiner, Art Unit 2682

FAX NO.: (703) 872-9306

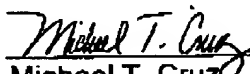
FROM: Michael T. Cruz

CLIENT: 1772

MATTER: 15266US01

Number of Pages This Transmission (Including Cover Page): **13**

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Michael T. Cruz
Reg. No. 44,636

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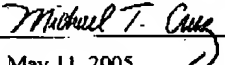

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/692,654
		Filing Date	October 18, 2000
		First Named Inventor	Stephen Wu
		Group Art Unit	2682
		Examiner Name	Marceau Milord
		Attorney Docket Number	15266US01
Total Number of Pages in This Submission		12	
ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO 1449/08A with references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) (sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____	
		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
		Remarks	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	McAndrews Held & Malloy, Ltd.		
Signature	 (Michael T. Cruz)		
Date	May 11, 2005		
CERTIFICATE OF FAX TRANSMITTAL			
I hereby certify that this correspondence is being sent via facsimile transmission to Marceau Milord, an Examiner of the United States Patent and Trademark Office, at (703) 872-9306 on May 11, 2005.			
Name (Print/type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636
Signature			Date May 11, 2005

Effective on 12/08/2004. Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818). FEE TRANSMITTAL for FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/692,854
		Filing Date	October 18, 2000
		First Named Inventor	Stephen Wu
		Examiner Name	Marceau Milord
		Art Unit	2682
TOTAL AMOUNT OF PAYMENT (\$) 120.00		Attorney Docket No.	15266US01
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u> For the above-identified deposit account, the Director is hereby authorized to (check all that apply) <input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	
EXAMINATION FEES		Small Entity	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500
Design	200	100	100
Plant	200	100	300
Reissue	300	150	500
Provisional	200	100	0
		Small Entity Fee (\$)	Fees Paid (\$)
		50	25
		200	100
		360	180
		Multiple Dependent Claims Fee	Fee Paid (\$)
		Total Claims	Fee Paid (\$)
		-20 or HP	x
		HP = highest number of total claims paid for, if greater than 20	
		Indep. Claims	Fee Paid (\$)
		-3 or HP	x
		HP = highest number of independent claims paid for, if greater than 3	
2. EXCESS CLAIM FEES			
Fee Description		Small Entity Fee (\$)	Fee Paid (\$)
Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent		50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200	100
Multiple dependent claims		360	180
		Multiple Dependent Claims Fee	Fee Paid (\$)
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
-100	/50	(round up to a whole number)	x
		Fee Paid (\$)	Fee Paid (\$)
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			
Other: Petition Fee for One-Month Extension of Time to Reply to Office Action		120.00	
SUBMITTED BY			
Signature	<u>Michael T. Cruz</u>	Registration No. (Attorney/Agent)	44,636
Name (print/type)	Michael T. Cruz	Telephone	(312) 775-8084
		Date	May 11, 2005